

ARIZONA FORM**210****Notice of Assumption of Duties
in a Fiduciary Capacity**

Complete and mail to: Fiduciary Unit, Arizona Department of Revenue, 1600 West Monroe, Room 610, Phoenix, AZ, 85007-2650
For assistance, call (602) 542-4643 or toll-free from area codes 520 and 928, call (800) 352-4090.

Notice is hereby given of the assumption of duties in a fiduciary capacity in the estate named below pursuant to ARS Section 43-1346.

Section I Decedent Information

Full name of decedent	Decedent's Social Security Number 	Decedent's date of death MM / DD / YYYY
Full name of spouse	Estate's Federal Employer I.D. Number	Decedent's date of birth MM / DD / YYYY
	Spouse's Social Security Number 	If spouse is deceased, date of death MM / DD / YYYY
Last known home address of decedent		

Date domicile was established in Arizona. If nonresident, describe Arizona property on a separate schedule. MM / DD / YYYY

Mailing address if different from home address

Section II Fiduciary Information

Name of fiduciary	Telephone number ()
Address	

Section III Probate Information

County in which estate is being probated	Probate Number	Date of fiduciary's appointment MM / DD / YYYY
Name of attorney	Telephone number ()	
Address		

Section IV Estate Information

Approximate value of entire gross estate \$	Approximate value of probate estate \$
Name, address, and Social Security Number of beneficiary(ies). Attach extra sheet with additional name(s), address(es), and SSN(s)	

Section V Termination of Fiduciary Relationship

Complete this section only if you are terminating a prior notice of a fiduciary relationship.

If you are terminating a prior notice concerning fiduciary relationships on file with the Arizona Department of Revenue, check this box. ☐

Enter the date the fiduciary capacity was terminated MM / DD / YYYY

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SIGNATURE OF FIDUCIARY	TITLE	DATE

NOTE: Tax information on file with the department is confidential. If the fiduciary wants the department to discuss tax matters with someone other than the fiduciary, the fiduciary must authorize the department to release confidential information to that person. If a fiduciary wishes to authorize an individual to represent or perform certain acts on behalf of the entity, a Power of Attorney must be filed and signed by the fiduciary acting in the position of the taxpayer. Use Arizona Form 285 for this purpose. Form 285 may be filed with Form 210. You may obtain Form 285 from our web site at www.revenue.state.az.us.